## UNITED STATES DISTRICT COURT

į	for the			
Southern Distr	rict of New York			
DR. ARTHUR FASS	) ) )			
Plaintiff(s) V. NORTHWELL HEALTHCARE SYSTEM	) ) Civil Action No. ) ) ) )			
Defendant(s)				
SUMMONS IN A CIVIL ACTION				
To: (Defendant's name and address)  NORTHWELL HEALTHC 2000 MARCUS AVENUE NEW HYDE PARK, NY 1				
A lawsuit has been filed against you.				
are the United States or a United States agency, or an offic	SQ. . 3			
If you fail to respond, judgment by default will be You also must file your answer or motion with the court.	entered against you for the relief demanded in the complaint.			
	CLERK OF COURT			
Date: 1/26/2024	/s/ P. Canales			
O Solicion	Signature of Clerk or Deputy Clerk			

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Civil Action No.

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	·	me of individual and title, if any)				
was re	eceived by me on (date)	•				
	☐ I personally served	I personally served the summons on the individual at (place)				
	-		on (date)	; or		
	☐ I left the summons	at the individual's residence or	usual place of abode with (name)			
		, a pers	on of suitable age and discretion who re-	sides there,		
	on (date)	o the individual's last known address; or				
	☐ I served the summo	ons on (name of individual)		, who is		
	designated by law to	accept service of process on bel	half of (name of organization)			
			on (date)	; or		
	☐ I returned the summ	nons unexecuted because		; or		
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty	of perjury that this information	n is true.			
Date:						
24.0.			Server's signature			
			Printed name and title			
			Server's address			

Additional information regarding attempted service, etc: